PHA Plans

Annual Plan for Fiscal Year 2001

NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH NOTICES

PHA Plan Agency Identification

PHA Name: Housing Authority City of Bellevue
PHA Number: NE 26 P 174
PHA Fiscal Year Beginning: 07/2001
Public Access to Information
Information regarding any activities outlined in this plan can be obtained by contacting: (select all that apply) X Main administrative office of the PHA Located at 8214 Armstrong Circle, Bellevue Nebraska PHA development management offices PHA local offices
Display Locations For PHA Plans and Supporting Documents
The PHA Plans (including attachments) are available for public inspection at: (select all that apply) X
PHA Plan Supporting Documents are available for inspection at: (select all that apply) X Main business office of the PHA PHA development management offices Other (list below)

Annual PHA Plan PHA Fiscal Year 2001

[24 CFR Part 903.7]

i.	Annual	Plan	Type:
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Select which type of Annual Plan the PHA will submit.

X Standard Plan Streamlined Plan: High Performing PHA Small Agency (<250 Public Housing Units) Administering Section 8 Only Troubled Agency Plan

ii. Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

The Bellevue Housing Authority (BHA) has prepared this Agency Plan in compliance with Section 511 of the Quality Housing and Work Responsibility Act of 1998 (now known as the Reform Act).

BHA was established in 1979. There is a six-member Board of Commissioners, including one Resident Commissioner, who are appointed by the Mayor of Bellevue and confirmed by the City Council, who governs the Housing Authority.

The mission of the Bellevue Housing Authority is to provide good affordable housing, to families in need and to provide the opportunity to achieve independence. Our goals for the fiscal year are:

- 1) 98% occupancy with no more than 2% TAR.
- 2) Maintain Financial Solvency
- 3) Preservation of BHA properties
- 4) Review all policies & update if needed
- 5) Positive BHA Image
- 6) Complete Utility Allowance Study for both Section 8 and Public Housing

Progress in Meeting 5-Year Plan Mission and Goals

Expand the Supply of Assisted Housing

Applied for and received preservation vouchers

Reduced public housing vacancies-begin leasing when receive 30 day notice Improve the Quality of Assisted Housing

Renovating Public Housing Units when they become vacant

Increase Assisted Housing Choice

Sent out flyers to prospective landlords and created landlord packet of information.

Provide an Improved Living Environment

Implemented public housing security improvements by providing outside lighting to one of our major developments

Promote Self Sufficiency

Increased the number and percentages of employed persons in assisted families.

Expanded and further developed the FSS program to incorporate the Community Service Requirement.

Preventive Maintenance program is given to all tenants upon lease up.

iii. Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

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Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Required Attachments:	
Admissions Policy for Deconcentration	
X FY 2000 Capital Fund Program Annual Statement	
Most recent board-approved operating budget (Required Attachment for PH.	As
that are troubled or at risk of being designated troubled ONLY)	
Optional Attachments:	
☐ PHA Management Organizational Chart	
FY 2000 Capital Fund Program 5 Year Action Plan	
☐ Public Housing Drug Elimination Program (PHDEP) Plan	
Comments of Resident Advisory Board or Boards (must be attached if not	
included in PHA Plan text)	
X Other (List below, providing each attachment name)	
Attachment B: Physical Inspection Deficiency Policy	
Attachment C: Pet Policy (NE174v02)	

Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the "Applicable & On Display" column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

	List of Supporting Documents Available for Review				
Applicable & On Display	Supporting Document	Applicable Plan Component			
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans			
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans			
X	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans			
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI))) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs			
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;			

v	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Section 8 Administrative Plan	Annual Plan: Eligibility,
X	Section 6 Administrative Flan	Selection, and Admissions Policies
Λ	Public Housing Deconcentration and Income Mixing	Annual Plan: Eligibility,
	Documentation:	Selection, and Admissions
	1. PHA board certifications of compliance with	Policies
	deconcentration requirements (section 16(a) of the US	
	Housing Act of 1937, as implemented in the 2/18/99	
	Quality Housing and Work Responsibility Act Initial	
	Guidance; Notice and any further HUD guidance) andDocumentation of the required deconcentration and	
	income mixing analysis	
	Public housing rent determination policies, including the	Annual Plan: Rent
	methodology for setting public housing flat rents	Determination
	X check here if included in the public housing	
X	A & O Policy	
	Schedule of flat rents offered at each public housing	Annual Plan: Rent
	development	Determination
X	X check here if included in the public housing	
71	A & O Policy Section 8 rent determination (payment standard) policies	Annual Plan: Rent
	X check here if included in Section 8	Determination
X	Administrative Plan	
	Public housing management and maintenance policy	Annual Plan: Operations
	documents, including policies for the prevention or	and Maintenance
	eradication of pest infestation (including cockroach	
X	infestation)	
	Public housing grievance procedures	Annual Plan: Grievance
X	X check here if included in the public housing	Procedures
A	A & O Policy Section 8 informal review and hearing procedures	Annual Plan: Grievance
	X check here if included in Section 8	Procedures
X	Administrative Plan	Troccares
	The HUD-approved Capital Fund/Comprehensive Grant	Annual Plan: Capital Needs
	Program Annual Statement (HUD 52837) for the active grant	Timuur Timii Cupiimi Tioons
X	year	
	Most recent CIAP Budget/Progress Report (HUD 52825) for	Annual Plan: Capital Needs
X	any active CIAP grant	
	Most recent, approved 5 Year Action Plan for the Capital	Annual Plan: Capital Needs
v	Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	
X	Approved HOPE VI applications or, if more recent,	Annual Plan: Capital Needs
	approved from E vi applications of, it more recent, approved or submitted HOPE VI Revitalization Plans or any	ramuar ram. Capitar Necus
	other approved proposal for development of public housing	

	Approved or submitted applications for demolition and/or	Annual Plan: Demolition
	disposition of public housing	and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable	Annual Plan: Conversion of
	revitalization of public housing and approved or submitted	Public Housing
	conversion plans prepared pursuant to section 202 of the	Tublic Housing
	1996 HUD Appropriations Act	
	Approved or submitted public housing homeownership	Annual Plan:
	programs/plans	Homeownership
	Policies governing any Section 8 Homeownership program	Annual Plan:
	check here if included in the Section 8	Homeownership
	Administrative Plan	
	Any cooperative agreement between the PHA and the TANF	Annual Plan: Community
X	agency	Service & Self-Sufficiency
	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community
X		Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other	Annual Plan: Community
X	resident services grant) grant program reports	Service & Self-Sufficiency
	The most recent Public Housing Drug Elimination Program	Annual Plan: Safety and
	(PHEDEP) semi-annual performance report for any open	Crime Prevention
	grant and most recently submitted PHDEP application	
	(PHDEP Plan)	1.71
	The most recent fiscal year audit of the PHA conducted	Annual Plan: Annual Audit
	under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.	
X	S.C. 1437c(h)), the results of that audit and the PHA's	
Λ	response to any findings Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional)	(specify as needed)
	(list individually; use as many lines as necessary)	(specify as needed)
	(list murviqually, use as many lines as necessary)	

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

	Housing	Needs of	Families	in the Jur	isdiction		
		by	Family T	ype			
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	Size	Loca- tion
Income <= 30% of AMI	252	5	2	2	N/A	3	3
Income >30% but <=50% of AMI	1397	5	2	2	N/A	3	3
Income >50% but <80% of AMI	4175	5	2	2	N/A	3	3
Elderly	170	5	2	2	N/A	3	3
Families with Disabilities	N/A	N/A	N/A	N/A	N/A	N/A	N/A
Race/Ethnicity	446	5	2	2	N/A	3	3
Race/Ethnicity	174	5	2	2	N/A	3	3
Race/Ethnicity							

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

Consolidated Plan of the Jurisdiction/s: City of Bellevue
Indicate year: 1992
U.S. Census data: the Comprehensive Housing Affordability Strategy
("CHAS") dataset
American Housing Survey data
Indicate year:
Other housing market study
Indicate year:
Other sources: (list and indicate year of information)

B. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. Complete one table for each type of PHA-wide waiting list administered by the PHA. PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Н	ousing Needs of Fam	ilies on the Waiting L	ist			
Waiting list type: (sele	ect one)					
	Section 8 tenant-based assistance					
Public Housing						
X Combined Sect	ion 8 and Public Hous	ing				
		isdictional waiting list	(optional)			
If used, identify	y which development/	subjurisdiction:				
	# of families	% of total families	Annual Turnover			
Waiting list total	104		104			
Waiting list total	104		104			
Extremely low income <=30% AMI		1000/				
	104	100%				
Very low income (>30% but <=50% AN	(II) 0					
Low income	0					
(>50% but <80% AMI	0					
Families with children		86%				
Elderly families	0					
Families with	15	14%				
Disabilities						
Race/ethnicity	60	58%				
Race/ethnicity	40	38%				
Race/ethnicity	3	3%				
Race/ethnicity	1	1%				
Characteristics by						
Bedroom Size						
(Public Housing						
Only)						
1BR	15	14%				
2 BR	47	45%				
3 BR	29	28%				
4 BR	12	12%				
5 BR 1		1%				
5+ BR						
Is the waiting list closed (select one)? No X Yes						
If yes:						
	How long has it been closed (# of months)? 3 MONTHS					
		ist in the PHA Plan yea				
		ories of families onto the	e waiting list, even if			
generally close	generally closed? X No Yes					



C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

its cur	rent resources by:
Select al	Il that apply
X	Employ effective maintenance and management policies to minimize the number of public housing units off-line
X	Reduce turnover time for vacated public housing units
X	Reduce time to renovate public housing units
	Seek replacement of public housing units lost to the inventory through mixed finance development
	Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
X	Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
X	Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
X	Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
X	Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
X	Participate in the Consolidated Plan development process to ensure
	coordination with broader community strategies Other (list below)
Strate	gy 2: Increase the number of affordable housing units by:
	Il that apply
X	Apply for additional section 8 units should they become available
	Leverage affordable housing resources in the community through the creation of mixed - finance housing
X	Pursue housing resources other than public housing or Section 8 tenant-based assistance.
	Other: (list below)

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI Select all that apply

X X	Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
	Employ admissions preferences aimed at families with economic hardships Adopt rent policies to support and encourage work Other: (list below)
Need:	Specific Family Types: Families at or below 50% of median
	gy 1: Target available assistance to families at or below 50% of AMI l that apply
~	»FF-1
	Employ admissions preferences aimed at families who are working Adopt rent policies to support and encourage work Other: (list below)
Need:	Specific Family Types: The Elderly
	gy 1: Target available assistance to the elderly:
Select al	l that apply
X X	Seek designation of public housing for the elderly Apply for special-purpose vouchers targeted to the elderly, should they become available
	Other: (list below)
Need:	Specific Family Types: Families with Disabilities
	gy 1: Target available assistance to Families with Disabilities: 1 that apply
Sciect ai	т шат аррту
	Seek designation of public housing for families with disabilities Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
X	Needs Assessment for Public Housing Apply for special-purpose vouchers targeted to families with disabilities, should they become available
X	Affirmatively market to local non-profit agencies that assist families with disabilities
	Other: (list below)

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs: Select if applicable X Affirmatively market to races/ethnicities shown to have disproportionate housing needs Other: (list below) Strategy 2: Conduct activities to affirmatively further fair housing Select all that apply X Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units X Market the section 8 program to owners outside of areas of poverty /minority concentrations Other: (list below) Other Housing Needs & Strategies: (list needs and strategies below) (2) Reasons for Selecting Strategies Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue: X Funding constraints X Staffing constraints Limited availability of sites for assisted housing Extent to which particular housing needs are met by other organizations in the commuity Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA X Influence of the housing market on PHA programs Community priorities regarding housing assistance Results of consultation with local or state government X Results of consultation with residents and the Resident Advisory Board Results of consultation with advocacy groups Other: (list below)

2. Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

	al Resources:			
Planned Sources and Uses				
Sources	Planned \$	Planned Uses		
1. Federal Grants (FY 2000 grants)				
a) Public Housing Operating Fund	\$9,928.00			
b) Public Housing Capital Fund	\$101,976.00			
c) HOPE VI Revitalization				
d) HOPE VI Demolition				
e) Annual Contributions for Section				
8 Tenant-Based Assistance	\$986,199.00			
f) Public Housing Drug Elimination				
Program (including any Technical				
Assistance funds)				
g) Resident Opportunity and Self-				
Sufficiency Grants				
h) Community Development Block				
Grant				
i) HOME				
Other Federal Grants (list below)				
2. Prior Year Federal Grants				
(unobligated funds only) (list				
below)				
CIAP	\$11,902.16			
Capital Fund	\$77,544.00			
3. Public Housing Dwelling Rental				
Income	\$118,760.00			
4. Other income (list below)	\$2,000.00			
Rental of sign				
4. Non-federal sources (list below)				
Total resources	\$1,308,309.16			

3. PHA Policies Governing Eligibility, Selection, and Admissions [24 CFR Part 903.7 9 (c)]

Α.	Pub	lic	Hou	sing
-		_		

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

(1) Eligibility

a.	that apply) \underline{X} When families	A verify eligibility for admission to public housing? (select all are within a certain number of being offered a unit: (50) are within a certain time of being offered a unit: (state time) e)			
b.	admission to public	(screening) factors does the PHA use to establish eligibility for housing (select all that apply)? ug-related activity e)			
d.	X Yes No: X Yes No: X Yes No:	Does the PHA request criminal records from local law enforcement agencies for screening purposes? Does the PHA request criminal records from State law enforcement agencies for screening purposes? Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)			
(2)Waiting List Organization					
a.	Which methods doe (select all that apply X Community-wi Sub-jurisdictio Site-based wait Other (describe	ide list nal lists ting lists			

X PHA main administrative		
PHA development site mOther (list below)	anagement office	
	ne or more site-based waiting lists in the coming year, questions; if not, skip to subsection (3) Assignment	
1. How many site-based wait	ing lists will the PHA operate in the coming year? N/A	
the upo HUD-a	y or all of the PHA's site-based waiting lists new for coming year (that is, they are not part of a previously- approved site based waiting list plan)? how many lists?	
<u> </u>	milies be on more than one list simultaneously how many lists?	
 4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)? PHA main administrative office All PHA development management offices Management offices at developments with site-based waiting lists At the development to which they would like to apply Other (list below) 		
(3) Assignment		
<u> </u>	es are applicants ordinarily given before they fall to the m the waiting list? (select one)	
b. X Yes No: Is this poli	cy consistent across all waiting list types?	
c. If answer to b is no, list variate waiting list/s for the PHA:	tions for any other than the primary public housing	

(4) Admissions Preferences a. Income targeting: X Yes □ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

			by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?
b.	In v belo X X X	Emergencies Overhoused Underhoused Medical justif Administrativ work)	e reasons determined by the PHA (e.g., to permit modernization ce: (state circumstances below)
		ferences Yes No:	Has the PHA established preferences for admission to public housing (other than date and time of application)? (If "no" is selected, skip to subsection (5) Occupancy)

2. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

 1 1 0 0 0 1 0 1 0 1 0 1 0 1 0 0 0 0 0 0
Involuntary Displacement (Disaster, Government Action, Action of Housing
Owner, Inaccessibility, Property Disposition)
Victims of domestic violence
Substandard housing
Homelessness
High rent burden (rent is > 50 percent of income)

Other	preferences: (select below)
	Working families and those unable to work because of age or disability
	Veterans and veterans' families
X	Residents who live and/or work in the jurisdiction
	Those enrolled currently in educational, training, or upward mobility programs
	Households that contribute to meeting income goals (broad range of incomes)
П	Households that contribute to meeting income requirements (targeting)
	Those previously enrolled in educational, training, or upward mobility
	programs
	Victims of reprisals or hate crimes
H	Other preference(s) (list below)
	Other preference(s) (fist below)
the sec (eit nur	the PHA will employ admissions preferences, please prioritize by placing a "1" in space that represents your first priority, a "2" in the box representing your ond priority, and so on. If you give equal weight to one or more of these choices ther through an absolute hierarchy or through a point system), place the same mber next to each. That means you can use "1" more than once, "2" more than se, etc.
1	Date and Time
Forme	er Federal preferences:
1 OIIII	Involuntary Displacement (Disaster, Government Action, Action of Housing
	Owner, Inaccessibility, Property Disposition)
	Victims of domestic violence
	Substandard housing Homelessness
	High rent burden
Other	preferences (select all that apply)
	Working families and those unable to work because of age or disability
H	Veterans and veterans' families
1	Residents who live and/or work in the jurisdiction
	Those enrolled currently in educational, training, or upward mobility programs
	Households that contribute to meeting income goals (broad range of incomes)
H	Households that contribute to meeting income requirements (targeting)
片	Those previously enrolled in educational, training, or upward mobility
Ш	
	programs Victims of reprisels or hete crimes
H	Victims of reprisals or hate crimes
	Other preference(s) (list below)
4. Re	lationship of preferences to income targeting requirements:
	The PHA applies preferences within income tiers
X	Not applicable: the pool of applicant families ensures that the PHA will meet
	income targeting requirements

(5) Occupancy a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply) The PHA-resident lease X X The PHA's Admissions and (Continued) Occupancy policy PHA briefing seminars or written materials Other source (list) b. How often must residents notify the PHA of changes in family composition? (select all that apply) X At an annual reexamination and lease renewal Any time family composition changes X At family request for revision Other (list) (6) Deconcentration and Income Mixing a. Yes X No: Does the PHA have any general occupancy (family) public Housing developments covered by the deconcentration rule? If no, this section is complete. If yes continue to the next question. b. | Yes X No: Do any of these covered developments have average incomes above or below 85% to 115% of the average incomes of all such developments? If no, this section is complete. B. Section 8 Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates). (1) Eligibility a. What is the extent of screening conducted by the PHA? (select all that apply) X Criminal or drug-related activity only to the extent required by law or regulation Criminal and drug-related activity, more extensively than required by law or

More general screening than criminal and drug-related activity (list factors

regulation

Other (list below)

below)

b.	X Yes No:	Does the PHA request criminal records from local law enforcement agencies for screening purposes?				
c.	X Yes No:	Does the PHA request criminal records from State law enforcement agencies for screening purposes?				
d.	X Yes No:	Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)				
e.	e. Indicate what kinds of information you share with prospective landlords? (select all that apply) X Criminal or drug-related activity Other (describe below)					
(2)	<u> Waiting List Orga</u>	anization				
a.	 With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply) None X Federal public housing Federal moderate rehabilitation Federal project-based certificate program Other federal or local program (list below) 					
b.	 Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply) X PHA main administrative office Other (list below) 					
(3)	Search Time					
a.		oes the PHA give extensions on standard 60-day period to earch for a unit?				
If :	yes, state circumstan Medical	nces below:				

(4) Admissions Preferences

a. Inc	come targeting	
X Ye	1	Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?
b. Pre	eferences Yes X No:	Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent (5) Special purpose section 8 assistance programs)
co		llowing admission preferences does the PHA plan to employ in the elect all that apply from either former Federal preferences or other
Forme	Owner, Inace Victims of d Substandard Homelessner	Displacement (Disaster, Government Action, Action of Housing cessibility, Property Disposition) omestic violence housing
Other	Veterans and Residents who was a contract of the contract of t	select below) nilies and those unable to work because of age or disability diveterans' families ho live and/or work in the jurisdiction ed currently in educational, training, or upward mobility programs that contribute to meeting income goals (broad range of incomes) that contribute to meeting income requirements (targeting) busly enrolled in educational, training, or upward mobility eprisals or hate crimes ence(s) (list below)

3.	If the PHA will employ admissions preferences, please prioritize by placing a "1" in the space that represents your first priority, a "2" in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use "1" more than once, "2" more than once, etc.
	Date and Time
Fo	Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition) Victims of domestic violence Substandard housing Homelessness High rent burden
Ot	ther preferences (select all that apply) Working families and those unable to work because of age or disability Veterans and veterans' families Residents who live and/or work in the jurisdiction Those enrolled currently in educational, training, or upward mobility programs Households that contribute to meeting income goals (broad range of incomes) Households that contribute to meeting income requirements (targeting) Those previously enrolled in educational, training, or upward mobility programs Victims of reprisals or hate crimes Other preference(s) (list below)
4.	Among applicants on the waiting list with equal preference status, how are applicants selected? (select one) Date and time of application Drawing (lottery) or other random choice technique
5.	If the PHA plans to employ preferences for "residents who live and/or work in the jurisdiction" (select one) This preference has previously been reviewed and approved by HUD The PHA requests approval for this preference through this PHA Plan
6.	Relationship of preferences to income targeting requirements: (select one) The PHA applies preferences within income tiers Not Applicable: the pool of applicant families ensures the PHA will meet income targeting requirements.

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply) X The Section 8 Administrative Plan X Briefing sessions and written materials Other (list below)	
 b. How does the PHA announce the availability of any special-purpose section 8 programs to the public? X Through published notices Other (list below) 	
4. PHA Rent Determination Policies	
[24 CFR Part 903.7 9 (d)]	
A. Public Housing Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.	
(1) Income Based Rent Policies	
Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.	
a. Use of discretionary policies: (select one)	
The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))	
0r	
X The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)	•

b.	Mir	nimum Rent
1.		at amount best reflects the PHA's minimum rent? (select one) \$0 \$1-\$25 \$26-\$50
2.		Yes X No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?
3.	If ye	es to question 2, list these policies below:
c.	Re	nts set at less than 30% than adjusted income
	1.	Yes X No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?
	2.	If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:
d.		ich of the discretionary (optional) deductions and/or exclusions policies does the A plan to employ (select all that apply) For the earned income of a previously unemployed household member For increases in earned income Fixed amount (other than general rent-setting policy) If yes, state amount/s and circumstances below:
		Fixed percentage (other than general rent-setting policy) If yes, state percentage/s and circumstances below:
		For household heads For other family members For transportation expenses For the non-reimbursed medical expenses of non-disabled or non-elderly families Other (describe below)

e.	Ceiling rents
1.	Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income (select one) Yes for all developments Yes but only for some developments No
2.	For which kinds of developments are ceiling rents in place? (select all that apply) For all developments For all general occupancy developments (not elderly or disabled or elderly only) For specified general occupancy developments For certain parts of developments; e.g., the high-rise portion For certain size units; e.g., larger bedroom sizes X Other (list below) Scattered Sites
3.	Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply) Market comparability study X Fair market rents (FMR) 95 th percentile rents 75 percent of operating costs 100 percent of operating costs for general occupancy (family) developments Operating costs plus debt service The "rental value" of the unit Other (list below)
f.	Rent re-determinations:
1.	Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply) Never At family option Any time the family experiences an income increase X Any time a family experiences an income increase above a threshold amount o percentage: (if selected, specify threshold) \$300.00 Other (list below)
g.	Yes X No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

1.	In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.) X The section 8 rent reasonableness study of comparable housing X Survey of rents listed in local newspaper X Survey of similar unassisted units in the neighborhood Other (list/describe below)
	Section 8 Tenant-Based Assistance
con the	emptions: PHAs that do not administer Section 8 tenant-based assistance are not required to applete sub-component 4B. Unless otherwise specified, all questions in this section apply only to tenant-based section 8 assistance program (vouchers, and until completely merged into the acher program, certificates).
(1)	Payment Standards
Des	scribe the voucher payment standards and policies.
a.	What is the PHA's payment standard? (select the category that best describes your standard) At or above 90% but below100% of FMR 100% of FMR X Above 100% but at or below 110% of FMR Above 110% of FMR (if HUD approved; describe circumstances below)
b.	If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply) FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area The PHA has chosen to serve additional families by lowering the payment standard Reflects market or submarket Other (list below)
c.	If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply) X FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area X Reflects market or submarket X To increase housing options for families Other (list below)

d.	How often are payment standards reevaluated for adequacy? (select one) X Annually Other (list below)
e.	What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply) X Success rates of assisted families X Rent burdens of assisted families Other (list below)
<u>(2)</u>	Minimum Rent
a.	What amount best reflects the PHA's minimum rent? (select one) \$0\$ \$1-\$25\$ \$X \$26-\$50
b.	Yes X No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)
<u>5.</u> [24	Operations and Management CFR Part 903.7 9 (e)]
	emptions from Component 5: High performing and small PHAs are not required to complete this tion. Section 8 only PHAs must complete parts A, B, and C(2)
Α.	PHA Management Structure
	scribe the PHA's management structure and organization.
X	An organization chart showing the PHA's management structure and organization is attached. A brief description of the management structure and organization of the PHA follows:
	Executive Director Secretary FSS Section 8 Maintenance Housing Inspector

B. HUD Programs Under PHA PHA Management

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "N/A" to indicate that the PHA does not operate any of the programs listed below.

Program Name	Units or Families Served at Year	Expected Turnover
	Beginning	
Public Housing	51	5
Section 8 Vouchers	220	60
Section 8 Certificates	N/A	
Section 8 Mod Rehab	N/A	
Special Purpose Section		
8 Certificates/Vouchers		
(list individually)	N/A	
Public Housing Drug		
Elimination Program		
(PHDEP)	N/A	
Other Federal		
Programs(list		
individually)	N/A	

C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

- (1) Public Housing Maintenance and Management: (list below)
 Maintenance Policy
 Admissions & Continued Occupancy Policy
 Extermination Policy
- (2) Section 8 Management: (list below) Administration Plan

6. HA Grievance Procedures [24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6.
Section 8-Only PHAs are exempt from sub-component 6A.

\mathcal{I}	mon o-omy i ii	ins are ca	empt from suo-component or.
	•		•
	Public Hou Yes X		Has the PHA established any written grievance procedures in addition to federal requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?
	If yes, list ac	dditions	to federal requirements below:
2.	initiate the IX PHA ma	PHA gri ain adm velopm	should residents or applicants to public housing contact to evance process? (select all that apply) inistrative office ent management offices (v)
	Section 8 T	No: I a i 8	Based Assistance Has the PHA established informal review procedures for pplicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal equirements found at 24 CFR 982?
	If yes, list ac	dditions	to federal requirements below:
2.	informal rev	view and ain adm	should applicants or assisted families contact to initiate the d informal hearing processes? (select all that apply) inistrative office (v)
24 Exe	CFR Part 903.	7 9 (g)] Componer	ement Needs nt 7: Section 8 only PHAs are not required to complete this component and
	Capital Fu		vities
Ехє	emptions from s	sub-comp	onent 7A: PHAs that will not participate in the Capital Fund Program may other PHAs must complete 7A as instructed.

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Sele	ect one:
X	The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment A
-or-	
	The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)
(2)	Optional 5-Year Action Plan
Ager can b	ncies are encouraged to include a 5-Year Action Plan covering capital work items. This statement be completed by using the 5 Year Action Plan table provided in the table library at the end of the Plan template OR by completing and attaching a properly updated HUD-52834.
a. [Yes X No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)
b. I	f yes to question a, select one: The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name
	The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

HOPE VI and/or public hous:	ing development or replacement activities not described in the Capital Fund
Program Annual Statement.	
sk ea b) St	as the PHA received a HOPE VI revitalization grant? (if no, kip to question c; if yes, provide responses to question b for ach grant, copying and completing as many times as necessary) tatus of HOPE VI revitalization grant (complete one set of questions for each grant)
Revitalization Pla Revitalization Pla Revitalization Pla	t the statement that best describes the current status) in under development in submitted, pending approval
in	bes the PHA plan to apply for a HOPE VI Revitalization grant the Plan year? Tyes, list development name/s below:
ac	ill the PHA be engaging in any mixed-finance development ctivities for public housing in the Plan year? yes, list developments or activities below:
de C	Il the PHA be conducting any other public housing evelopment or replacement activities not discussed in the apital Fund Program Annual Statement? Tyes, list developments or activities below:
8. Demolition and I [24 CFR Part 903.7 9 (h)]	<u>Disposition</u>
	Section 8 only PHAs are not required to complete this section.
ac 19 sk	oes the PHA plan to conduct any demolition or disposition ctivities (pursuant to section 18 of the U.S. Housing Act of 937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If "No", kip to component 9; if "yes", complete one activity description or each development.)

2. Activity Description	
Yes No: Has the PHA provided the activities description information the optional Public Housing Asset Management Table? (If "yes", skip to component 9. If "No", complete the Activity Description table below.)	in
Demolition/Disposition Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. Activity type: Demolition	
Disposition	
3. Application status (select one)	
Approved	
Submitted, pending approval	
Planned application	7
4. Date application approved, submitted, or planned for submission: (DD/MM/YY) 5. Number of units affected:	<u>) </u>
6. Coverage of action (select one) Part of the development	
Total development	
7. Timeline for activity:	
a. Actual or projected start date of activity:	
b. Projected end date of activity:	
O. 210Journal of a distriction	
9. <u>Designation of Public Housing for Occupancy by Elderly Familor Families with Disabilities or Elderly Families and Families with Disabilities or Elderly Families with Disabilities or Elderly Families and Families with Disabilities or Elderly Families and Disabilities or Elderly Families with Disabilities with Disabilities or Elderly Families with Disabilities with Disabilit</u>	
Disabilities	
[24 CFR Part 903.7 9 (i)]	
Exemptions from Component 9; Section 8 only PHAs are not required to complete this section.	
1. Yes X No: Has the PHA designated or applied for approval to designate of	
does the PHA plan to apply to designate any public housing for	
occupancy only by the elderly families or only by families with	
disabilities, or by elderly families and families with disabilities	
will apply for designation for occupancy by only elderly familie	
only families with disabilities, or by elderly families and families	
with disabilities as provided by section 7 of the U.S. Housing A	
of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If "N	
skip to component 10. If "yes", complete one activity description for each development, unless the PHA is eligible to complete a	
streamlined submission; PHAs completing streamlined	
submissions may skip to component 10.)	
submissions may skip to component to.)	

2. Activity Description	
Yes No: Has the PHA provided all required activity description information	ıtion
for this component in the optional Public Housing Asset	
Management Table? If "yes", skip to component 10. If "No",	
complete the Activity Description table below.	
Designation of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. Designation type:	
Occupancy by only the elderly	
Occupancy by families with disabilities	
Occupancy by only elderly families and families with disabilities	
3. Application status (select one)	
Approved; included in the PHA's Designation Plan	
Submitted, pending approval	
Planned application	
4. Date this designation approved, submitted, or planned for submission: (DD/MN	<u>4/YY)</u>
5. If approved, will this designation constitute a (select one)	
New Designation Plan	
Revision of a previously-approved Designation Plan?	
6. Number of units affected:	
7. Coverage of action (select one)	
Part of the development	
Total development	
10. Conversion of Public Housing to Tenant-Based Assistance	
[24 CFR Part 903.7 9 (j)]	
Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.	
A. Assessments of Reasonable Revitalization Pursuant to section 202 of the H	UD
FY 1996 HUD Appropriations Act	
1. Yes X No: Have any of the PHA's developments or portions of	1
developments been identified by HUD or the PHA as cover	
under section 202 of the HUD FY 1996 HUD Appropriatio	
Act? (If "No", skip to component 11; if "yes", complete on	
activity description for each identified development, unless	
eligible to complete a streamlined submission. PHAs	
completing streamlined submissions may skip to componer	ıt
11.)	

2. Activity Description
Yes No: Has the PHA provided all required activity description
information for this component in theoptional Public Housing
Asset Management Table? If "yes", skip to component 11. If
"No", complete the Activity Description table below.
Conversion of Public Housing Activity Description
1a. Development name:
1b. Development (project) number:
2. What is the status of the required assessment?
Assessment underway
Assessment results submitted to HUD
Assessment results approved by HUD (if marked, proceed to next
question)
Other (explain below)
3. Yes No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to
block 5.)
4. Status of Conversion Plan (select the statement that best describes the current
status)
Conversion Plan in development
Conversion Plan submitted to HUD on: (DD/MM/YYYY)
Conversion Plan approved by HUD on: (DD/MM/YYYY)
Activities pursuant to HUD-approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other
than conversion (select one)
Units addressed in a pending or approved demolition application (date
submitted or approved:
Units addressed in a pending or approved HOPE VI demolition application
(date submitted or approved:)
Units addressed in a pending or approved HOPE VI Revitalization Plan
(date submitted or approved:)
Requirements no longer applicable: vacancy rates are less than 10 percent
Requirements no longer applicable: site now has less than 300 units
Other: (describe below)
other. (desertibe below)
B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937
C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937

11. Homeownership Programs Administered by the PHA [24 CFR Part 903.7 9 (k)] A. Public Housing Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A. 1. Yes X No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If "No", skip to component 11B; if "yes", complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to small PHA or high performing **PHA** status. PHAs completing streamlined submissions may skip to component 11B.) 2. Activity Description Yes No: Has the PHA provided all required activity description information for this component in the optional Public Housing Asset Management Table? (If "yes", skip to component 12. If "No", complete the Activity Description table below.) **Public Housing Homeownership Activity Description** (Complete one for each development affected) 1a. Development name: 1b. Development (project) number: 2. Federal Program authority: HOPE I 5(h) Turnkey III Section 32 of the USHA of 1937 (effective 10/1/99) 3. Application status: (select one) Approved; included in the PHA's Homeownership Plan/Program Submitted, pending approval Planned application 4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY) 5. Number of units affected: 6. Coverage of action: (select one) Part of the development

Total development

B. Section 8 Tenant Based Assistance	
1. Yes X No:	Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982? (If "No", skip to component 12; if "yes", describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. High performing PHAs may skip to component 12.)
2. Program Description:	
a. Size of Program Yes No:	Will the PHA limit the number of families participating in the section 8 homeownership option?
If the answer to the number of particip. 25 or fewer pa 26 - 50 partici 51 to 100 part more than 100	articipants pants icipants
b. PHA-established e	eligibility criteria Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria? If yes, list criteria below:
12. PHA Community Service and Self-sufficiency Programs [24 CFR Part 903.7 9 (1)]	
Exemptions from Compor	nent 12: High performing and small PHAs are not required to complete this ally PHAs are not required to complete sub-component C.
A. PHA Coordination with the Welfare (TANF) Agency	
 Cooperative agrees X Yes ☐ No: 	ments: Has the PHA has entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)? If yes, what was the date that agreement was signed? 02/15/2000
	11 100, what was the date that agreement was signed: 02/15/2000

2.	Other coordination efforts between the PHA and TANF agency (select all that apply) X Client referrals X Information sharing regarding mutual clients (for rent determinations and otherwise) X Coordinate the provision of specific social and self-sufficiency services and programs to eligible families Dointly administer programs Partner to administer a HUD Welfare-to-Work voucher program Joint administration of other demonstration program Other (describe)
	Services and programs offered to residents and participants Output Description:
a.	Self-Sufficiency Policies Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply) Public housing rent determination policies Public housing admissions policies Section 8 admissions policies Preference in admission to section 8 for certain public housing families Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA Preference/eligibility for public housing homeownership option participation Preference/eligibility for section 8 homeownership option participation Other policies (list below)

b.	Economic and So	cial self-sufficiency programs
	X Yes No:	Does the PHA coordinate, promote or provide any programs to
		enhance the economic and social self-sufficiency of residents?
		(If "yes", complete the following table; if "no" skip to sub-
		component 2, Family Self Sufficiency Programs. The position
		of the table may be altered to facilitate its use.)

	Serv	vices and Progra	ms	
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
Family Self Sufficiency	39	Waiting List	PHA Main Office	Both

(2) Family Self Sufficiency program/s

a. Participation Description

Far	mily Self Sufficiency (FSS) Participa	tion
Program	Required Number of Participants	Actual Number of Participants
	(start of FY 2000 Estimate)	(As of: 12/01/00)
Public Housing		
	11	11
Section 8		
	19	19

b. X Yes No:	If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps
	the PHA plans to take to achieve at least the minimum program size?
	SIZC!

If no, list steps the PHA will take below:

C. Welfare Benefit Reductions

- 1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)
 - X Adopting appropriate changes to the PHA's public housing rent determination policies and train staff to carry out those policies
 - X Informing residents of new policy on admission and reexamination
 - X Actively notifying residents of new policy at times in addition to admission and reexamination.
 - X Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
 - X Establishing a protocol for exchange of information with all appropriate TANF agencies

	Other:	(list	bel	low)
-	Cuit.	(1100	00	,

D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937

Community Service Requirement Policy

The Quality Housing and Work Responsibility Act of 1998, now known as the Reform Act requires public housing residents to contribute eight hours per month in community service or to participate in a self-sufficiency program

Those exempted from the work requirement are all persons 62 or older, blind or disabled, employed full time (32-40 hours per week) a Section 8 recipient, and a person engaged in a welfare to work program who is complying with the program requirements.

The Community Service Requirements will be incorporated into the public housing dwelling lease. Thirty days prior to the renewal of the lease, the housing authority must determine if a resident has complied with the work requirement. Renewal of the lease may be denied if a resident has not complied with the community service requirement.

The Family Self Sufficiency Coordinator will monitor the Community Service. The Executive Director will provide the FSS Coordinator a list of the clients who must perform Community Service on the first of every month. All clients will be given the Rules of Community Service and a Community Service Participation Form. The FSS Coordinator will verify the forms are completed and work is completed. The Executive Director will send clients who have not complied a letter of non-compliance.

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub component D.

A. Need for measures to ensure the safety of public housing residents

1.	Des	scribe the need for measures to ensure the safety of public housing residents
	(sel	ect all that apply)
		High incidence of violent and/or drug-related crime in some or all of the PHA's
		developments
		High incidence of violent and/or drug-related crime in the areas surrounding or
		adjacent to the PHA's developments
		Residents fearful for their safety and/or the safety of their children
		Observed lower-level crime, vandalism and/or graffiti
		People on waiting list unwilling to move into one or more developments due to
		perceived and/or actual levels of violent and/or drug-related crime
		Other (describe below)
2.	Wh	at information or data did the PHA used to determine the need for PHA actions
	to	improve safety of residents (select all that apply).
		Safety and security survey of residents
		Analysis of crime statistics over time for crimes committed "in and around"
		public housing authority
		Analysis of cost trends over time for repair of vandalism and removal of graffiti
		Resident reports
		PHA employee reports
		Police reports
		Demonstrable, quantifiable success with previous or ongoing anticrime/anti
		drug programs
		Other (describe below)
3.	Wh	nich developments are most affected? (list below)

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply) Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities Crime Prevention Through Environmental Design Activities targeted to at-risk youth, adults, or seniors Volunteer Resident Patrol/Block Watchers Program Other (describe below) 2. Which developments are most affected? (list below) C. Coordination between PHA and the police 1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply) Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan Police provide crime data to housing authority staff for analysis and action Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence) Police regularly testify in and otherwise support eviction cases Police regularly meet with the PHA management and residents Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services Other activities (list below) 2. Which developments are most affected? (list below) D. Additional information as required by PHDEP/PHDEP Plan PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds. Is the PHA eligible to participate in the PHDEP in the fiscal year | Yes | No: covered by this PHA Plan? Has the PHA included the PHDEP Plan for FY 2000 in this PHA Yes No: Plan? Yes No: This PHDEP Plan is an Attachment. (Attachment Filename:

B. Crime and Drug Prevention activities the PHA has undertaken or plans to

undertake in the next PHA fiscal year

14. RESERVED FOR PET POLICY

[24 CFR Part 903.7 9 (n)]

PET POLICY

Resolution #164

Under Section 227 of the Housing and Urban Development Rural Recovery Act of 1983, elderly, handicapped or disabled persons occupying a rental unit in a government assisted housing complex that has been exclusively built for the Elderly and Handicapped are permitted to have pets in their dwelling unit. Under the Quality Housing and Work Responsibility Act of 1998 families that reside in a government assisted housing unit are permitted to have pets in their dwelling unit. All residents who choose to have pets must have the physical and financial capability to care for their pet and abide by the PET POLICY that has been established for Bellevue Housing Authority.

- A. <u>APPLICATION FOR PET PERMIT</u>. Prior to housing any pet on premises the resident shall apply to the manager for a pet permit which shall be accompanied by the following:
 - 1. A current license issued by the appropriate authority, if applicable.
 - 2. Evidence that the pet has been spayed or neutered.
 - 3. Evidence that the pet has received current rabies and distemper inoculations or boosters as applicable.
- B. All residents with pets permitted to be kept on premises shall comply with the following rules.
 - 1. Usual and/or commonly owned domesticated, family-type, household pets including and limited to: dogs, cats, birds, and tropical fish, may be permitted. The weight of the dog or cat will not exceed 25 pounds without specific authorization on a case-by-case basis. Pets, other than the aforementioned, dogs, cats, birds or tropical fish, may not be permitted.
 - 2. Only one (1) pet per household will be permitted. Multiples greater than one (1) of pets usually and customarily confined to cages or similar restrictive devices (parakeets, fish, etc.) may be permitted.
 - 3. Dogs and cats must be licensed yearly with the appropriate authority and residents must show proof of annual rabies and distemper booster inoculations.
 - 4. Vicious and/or intimidating dogs and cats will not be allowed.
 - 5. All dogs and cats must be spayed or neutered, as applicable. All cats must be de-clawed.
 - 6. No pet, at any time, shall be permitted to run loose. Run loose shall be defined as Not being attached to a device which is held by or attached to the pet owner, or the owner's designated responsible person, by which that person can fully control the pet's actions.
 - a. Pets of any permitted type shall not be permitted in community rooms, common areas, or office area.
 - b. Birds must be confined to a cage at all times.
 - It shall not be permitted, at any time, for any person, to place upon or attach to the exterior of
 any authority property, any item that will accommodate, protect or secure any pet, without prior
 written approval.
 - 8. Residents shall not permit their pet to disturb, interfere, or diminish the peaceful enjoyment of other residents. The terms "disturb, interfere or diminish" shall include but not be limited to barking, howling, chirping, biting, scratching, and other like activity.
 - a. Complaints of disturbance of this nature, shall constitute a violation of lease and may result in the revocation of the pet permit, termination of the lease agreement or both.
 - 9. Residents must provide litter boxes for cat waste, which must be kept in the dwelling unit. Residents shall not permit refuse to accumulate nor to become unsightly or unsanitary. Residents are solely responsible for any pet droppings inside or outside the unit. Pet droppings must be cleaned up immediately, placed in a plastic bag and disposed of in a sanitary way.

- 10. Residents shall take adequate precautions and measures to eliminate pet odors within or around the unit and shall maintain the unit in a sanitary condition at all times.
- 11. If pets are kept unattended for a period of 12 hours or more, the management may enter the dwelling unit, remove the pet and transfer it to the proper authorities, subject to the provisions of State law and pertinent local ordinances. The management accepts no responsibility for the animal under such circumstances.
- 12. Residents shall not alter their unit, patio, or unit area in order to create an enclosure for any pet.
- 13. All complaints of disputes concerning pets in Bellevue HA shall be settled under the terms of the posted tenant grievance procedure.
- 14. The Housing Authority of the City of Bellevue will not be responsible for any injuries to other tenants of the Housing Authority, visitors, or other persons, caused by owner's pet.
- 15. Residents are responsible for all damages caused by their pets including but not limited to the cost of cleaning of carpets, draperies, and fumigation of the units.
- 16. <u>A PET SECURITY DEPOSIT</u> will be required in the amount of \$200.00 but shall not exceed the amount of \$350.00.
- 17. Residents are prohibited from feeding or harboring stray animals. The feeding of stray animals shall constitute having a pet without the permission of the management.
- 18. In the event of death of a pet, the resident shall properly remove and dispose of the remains.
- 19. Residents must identify an alternate custodian for pets in the event of resident illness or other absence from the dwelling unit. This identification of an alternate custodian must occur prior the management issuing a pet registration permit.
- 20. These rules do not apply to animals that assist the handicapped.
- C. The privilege of maintaining a pet shall be subject to the rules set forth in Paragraph B above. Failure to abide by these rules may result in the Pet permit being revoked, the tenant being asked to remove the animal from the premises, or face possible eviction.
- D. Should breach of the rules set forth in Paragraph B, above, occur, the management may also exercise any remedy granted it in accordance with applicable State Statutes.

REGARDING THE KEEPING OF PETS	AND AGREE TO ABIDE BY THOSE PROVISION	IS.
Tenant Signature	Date	
Co-Tenant Signature	Date	
H/A Representative	 Date	

I HAVE RECEIVED, READ, AND I UNDERSTAND THE ABOVE POLICY PROVISIONS

APPLICATION FOR PET PERMIT

Application for written permission to keep the following type pet in a dwelling unit operated by the Bellevue Housing Authority is hereby made:

Type of Animal	
Designated Alternate Pet Custodian: Address: Apartment #: Phone #:	
	rding privileges of keeping a pet and agree to abide by quirement for and agree to provide the housing authorit licy/Rules and Regulations.
Tenant Signature	Date
Custodian Signature	Date
Housing Authority Representative	Date
Picture of Pet: (Attach here)	

15. Civil Rights Certifications [24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Aud [24 CFR Part 903.7 9	
[24 CFR Part 903.79	(p)]
1. X Yes No:	Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U S.C. 1437c(h))? (If no, skip to component 17.)
2. X Yes No:	Was the most recent fiscal audit submitted to HUD?
3. Yes X No:	Were there any findings as the result of that audit?
4. Yes No	If there were any findings, do any remain unresolved? If yes, how many unresolved findings remain?
5. Yes No	: Have responses to any unresolved findings been submitted to HUD?
	If not, when are they due (state below)?
17. PHA Asset [24 CFR Part 903.7 9	
	ponent 17: Section 8 Only PHAs are not required to complete this component. mall PHAs are not required to complete this component.
1. Yes X No	o: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have not been addressed elsewhere in this PHA Plan?
2. What types of apply)	asset management activities will the PHA undertake? (select all that
X Not applica	
Private man	<u> </u>
	ent-based accounting
Other: (list	helow)
Onter. (list	5615 H)

3.	Yes X No:	Has the PHA included descriptions of asset management activities in the optional Public Housing Asset Management Table?
	CFR Part 903.7 9 (r)	
A.	Resident Adviso	ory Board Recommendations
1.	Yes X No:	Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?
2.		ents are: (if comments were received, the PHA MUST select one) Attachment (File name) ow:
3.	Considered c necessary.	did the PHA address those comments? (select all that apply) omments, but determined that no changes to the PHA Plan were anged portions of the PHA Plan in response to comments below:
	Other: (list be	elow)
В.	Description of E	Election process for Residents on the PHA Board
1.	Yes X No:	Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)
2.	Yes X No:	Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to subcomponent C.)

	Description of Resident Election Process Appointed by Mayor, confirmed by the City Council.
a.	Nomination of candidates for place on the ballot: (select all that apply) Candidates were nominated by resident and assisted family organizations Candidates could be nominated by any adult recipient of PHA assistance X Self-nomination: Candidates registered with the PHA and requested a place on ballot Other: (describe)
b.	Eligible candidates: (select one) Any recipient of PHA assistance Any head of household receiving PHA assistance Any adult recipient of PHA assistance Any adult member of a resident or assisted family organization Other (list) Public Housing Tenant
c.	Eligible voters: (select all that apply) All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance) Representatives of all PHA resident and assisted family organizations Other (list) Mayor
For	Statement of Consistency with the Consolidated Plan reach applicable Consolidated Plan, make the following statement (copy questions as many times as sessary).
1.	Consolidated Plan jurisdiction: (provide name here) Bellevue
	Consolidated Plan jurisdiction: (provide name here) Bellevue The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply) X The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s. X The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan. The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan. X Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below
	 The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply) X The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s. X The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan. The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan. X Activities to be undertaken by the PHA in the coming year are consistent with

D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.

Attachments

Use this section to provide any additional attachments referenced in the Plans.

Resident Commissioners Requirement:

The Housing Reform Act of 1998 included a requirement to appoint at least one resident commissioner to the Board of Commissioners. Bellevue Housing Authority approached the City of Bellevue's Mayor and City Council to increase the number of commissioners from five (5) to six (6) with the sixth position to be filled only by a resident in order to comply with this requirement.

BHA advertised for the position and residents were asked to contact the Mayor of Bellevue if they were interested in serving. Currently, Ms. Theresa Fritz is BHA's resident commissioner.

Membership of the Resident Advisory Board:

BHA established a Resident Advisory Board made up of both public housing and section 8 tenants/clients. The committee also includes management staff. BHA solicits tenants/clients volunteers for the committee by publishing the need in its quarterly newsletter. The RAB committee roster includes the following tenant/client members:

Mari Davidson 902 Willow Ave Bellevue, NE 68005 Public Housing

Theresa Fritz 4105 Bartman Bellevue, NE 68147 Public Housing Renee Hospodka 1214 Applewood G104 Papillion, NE 68046 Section 8

Cheri Graham 8205 Armstrong Circle Bellevue, NE 68147 Public Housing

PHA Plan Table Library

ATTACHMENT A

Component 7 Capital Fund Program Annual Statement Parts I, II, and II

Annual Statement

Capital Fund Program (CFP) Part I: Summary

Capital Fund Grant Number: NE26P17450101 FFY of Grant Approval: (06/2001)

X Original Annual Statement

Line No.	Summary by Development Account	Total Estimated Cost
1	Total Non-CGP Funds	
2	1406 Operations	2000.00
3	1408 Management Improvements	
4	1410 Administration	10,197.00
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	
8	1440 Site Acquisition	
9	1450 Site Improvement	9600.00
10	1460 Dwelling Structures	73,529.00
11	1465.1 Dwelling Equipment-Nonexpendable	6,650.00
12	1470 Nondwelling Structures	
13	1475 Nondwelling Equipment	
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	
18	1498 Mod Used for Development	
19	1502 Contingency	
20	Amount of Annual Grant (Sum of lines 2-19)	101,976.00
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation	
	Measures	

Annual Statement Capital Fund Program (CFP) Part II: Supporting Table

		1	
Development	General Description of Major Work	Development	Total
Number/Name	Categories	Account	Estimated
HA-Wide Activities		Number	Cost
001	Stoves, Refrigerators	1465	6650.00
001	AC/Heaters/carpet/	1460	45,635.00
001	Concrete/stoops/steps	1450	5,000.00
002	AC/heaters/carpet/faucets/stormdoors	1460	13,900.00
002	Concrete/stoops/steps	1450	1,500.00
003	AC/heaters/roof replacements/carpet/ Faucets/sinks/stormdoors	1460	6,950.00
003	Concrete	1450	3,100.00
005	AC/heater/roof replacement/carpet/sinks/ Stormdoors	1460	7,044.00
HA WIDE			
HA WIDE	Maintenance tools	1406	2,000.00
	Administration	1410	10,197.00
1	1	1	

Attachment B

Policy on Addressing Deficiencies on Physical Inspection Report

RESOLUTION #180

The Bellevue Housing Authority has implemented inspections on a monthly basis. This will allow the Housing Authority to inspect all units two (2) times a year. The first inspection will be the result of the REAC inspection completed by the HUD contractor. The inspections will include a copy of the finding from the HUD inspection. The second inspection will be to determine that maintenance items are being reported in a timely manner.

Any items marked as deficiencies from the REAC inspection will help establish the manner in which units will be scheduled to be inspected by the Housing Authority. All items marked with a Severity Level of 3 will be inspected first. Those items marked as Severity Level 3 will be corrected or abated within 24 hours if allowable, ie....smoke detectors, wiring, and any that are marked as life threatening. All other Severity Level 3 will be scheduled for repair based upon the funds available from the Authority's Capital Improvement Fund.

Inspecting every month will enable the Housing Authority to correct all minor deficiencies within the next REAC inspection period. It allows the Maintenance Technician the time to correct deficiencies and improve the property and still do everyday routine and scheduled maintenance. Correcting the deficiencies on a monthly basis based upon the inspection will allow the Authority the opportunity to improve the property and not strain the monthly budget, instead of completing all inspections and corrections in one month.

By completing inspections every month every unit will be re-inspected every six (6) months. This allows the Maintenance Technician to determine if maintenance items are being reported in a timely manner before the small problem turns into a costly and major repair. The inspections will be completed by the Maintenance Technician or the Executive Director.

Bellevue Housing Authority's one year goal is for all units to meet local code by the end of the fiscal year. The ultimate goal to be completed within a five year time period is that all units be update and maintenance work be on a preventive maintenance mode rather than tenant generated and emergency.

Capital Fund Program Five-Year Action Plan

Part I: Summary

PHA Name Bellevue Housing Authority				XOriginal 5-Year Plan ☐Revision No:	
Development Number/Name/HA- Wide	Year 1	Work Statement for Year 2 FFY Grant: PHA FY: 2002	Work Statement for Year 3 FFY Grant: PHA FY: 2003	Work Statement for Year 4 FFY Grant: PHA FY: 2004	Work Statement for Year 5 FFY Grant: PHA FY: 2005
	Annual Statement				
001		\$57,285.00	\$54,600.00	\$45,200.00	\$56,900.00
002		\$15,400.00	\$19,800.00	\$18,800.00	\$ 5,600.00
003		\$ 8,150.00	\$ 9,410.00	\$ 9,879.00	\$ 5,050.00
005		\$ 8,944.00	\$ 5,769.00	\$15,700.00	
006					
HA WIDE		\$12,197.00	\$12,397.00	\$12,397.00	\$34,426.00
Total CFP Funds (Est.)		\$101,976.00	\$101,976.00	\$101,976.00	\$101,976.00
Total Replacement					
Housing Factor Funds					

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities

	11 0 0						
Activities for		Activities for Year		Activities for Year:			
Year 1		FFY Grant:		FFY Grant:			
		PHA FY: 2002			PHA FY:2003		
	001	carpet/vinyl floor	\$ 3,785.00	001	stoves/fridge/ac/furnace	\$45,100.00	
	001	stoves/fridge/ac/furnace	\$48,500.00	001	carpet/vinyl	\$ 4,500.00	
	001	concrete/driveways	\$ 5,000.00	001	concrete/driveways	\$ 5000.00	
	002	carpet/vinyl/plumbing/	\$ 4,100.00	002	carpet/vinyl/plumbing/	\$ 4,100.00	
		stormdoor/			stormdoor/		
	002	ac/furnaces	\$ 5,800.00	002	ac/furnaces	\$ 8,700.00	
	002	roofs/concrete/driveway	\$ 5,500.00	002	roofs/concrete/driveway	\$ 7,000.00	
	003	ac/furnace	\$ 2,900.00	003	carpet/vinyl	\$ 1,510.00	
	003	roof/concrete/driveways	\$ 3,200.00	003	ac/furnace	\$ 2,900.00	
	003	carpet/vinyl/plumbing	\$ 2,050.00	003	roofs/concrete/driveway	\$ 5,000.00	
	005	ac/furnace	\$ 2,900.00	005	ac/furnaces/waterheater	\$ 3,600.00	
	005	roof/concrete/driveways	\$ 3,900.00	005	roof	\$ 2,169.00	
	005	carpet/vinyl/plumbing	\$ 2,144.00	HA WIDE	maint.equip/software	\$ 2,200.00	
	HA WIDE	maintenance tools	\$ 2,000.00				

HA WIDE Admin. \$10,197.

HA WIDe Administration \$10,197.00

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities

Activities for		Activities for Year		Activities for Year:			
Year 1		FFY Grant:			FFY Grant:		
		PHA FY: 2004			PHA FY:2005		
	001	carpet/vinyl floor	\$ 4,500.00	001	stoves/fridge/ac/furnace	\$47,400.00	
	001	stoves/fridge/ac/furnace	\$35,700.00	001	carpet/vinyl	\$ 4,500.00	
	001	concrete/driveways	\$ 5,000.00	001	concrete/driveways	\$ 5000.00	
	002	carpet/vinyl/plumbing/	\$ 6,000.00	002	carpet/vinyl/plumbing/	\$ 4,600.00	
		stormdoor/			stormdoor/		
	002	ac/furnaces	\$ 5,800.00	002	concrete/steps/driveway	\$ 1,000.00	
	002	roofs/concrete/driveway	\$ 7,000.00	003	roofs/concrete/driveway	\$ 2,800.00	
	003	carpet/vinyl/stormdoor	\$ 5,879.00	003	carpet/vinyl	\$ 2,250.00	
	003	roof/concrete/driveways	\$ 4,000.00	HA WIDE	maint.equip/software	\$ 2,200.00	
	005	ac/furnace	\$ 8,700.00	HA WIDE	Inspection automobile	\$17,369.00	
	005	roof/concrete/driveways	\$ 4,000.00	HA WIDE	computer upgrade	\$ 4,660.00	
	005	carpet/vinyl	\$ 3,000.00	HA WIDE	Administration	\$10,197.00	
	HA WIDE	maint.equip/software	\$ 2,200.00				
	HA WIDE	Administration	\$10,197.00				

Capital Fund Program Five-Year Action Plan Part II: Supporting Pages—Work Activities

Activities for		Activities for Year			Activities for Year:		
Year 1		FFY Grant:		FFY Grant:			
		PHA FY: 2004		PHA FY:2005			
	001	carpet/vinyl floor	\$ 4,500.00	001	stoves/fridge/ac/furnace	\$47,400.00	
	001	stoves/fridge/ac/furnace	\$35,700.00	001	carpet/vinyl	\$ 4,500.00	
	001	concrete/driveways	\$ 5,000.00	001	concrete/driveways	\$ 5000.00	
	002	carpet/vinyl/plumbing/	\$ 6,000.00	002	carpet/vinyl/plumbing/	\$ 4,600.00	
		stormdoor/			stormdoor/		
	002	ac/furnaces	\$ 5,800.00	002	concrete/steps/driveway	\$ 1,000.00	
	002	roofs/concrete/driveway	\$ 7,000.00	003	roofs/concrete/driveway	\$ 2,800.00	
	003	carpet/vinyl/stormdoor	\$ 5,879.00	003	carpet/vinyl	\$ 2,250.00	
	003	roof/concrete/driveways	\$ 4,000.00	HA WIDE	maint.equip/software	\$ 2,200.00	
	005	ac/furnace	\$ 8,700.00	HA WIDE	Inspection automobile	\$17,369.00	
	005	roof/concrete/driveways	\$ 4,000.00	HA WIDE	computer upgrade	\$ 4,660.00	
	005	carpet/vinyl	\$ 3,000.00	HA WIDE	Administration	\$10,197.00	
	HA WIDE	maint.equip/software	\$ 2,200.00				
	HA WIDE	Administration	\$10,197.00				

CAPITAL FUND PROGRAM TABLES START HERE

Ann	Annual Statement/Performance and Evaluation Report									
Cap	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary									
_	ame: Bellevue Housing Authority	Grant Type and Number		,	Federal FY of Grant:					
		Capital Fund Program Grant 1 Replacement Housing Factor			6/2000					
	ginal Annual Statement Reserve for Disasters/ E)						
	ormance and Evaluation Report for Period Ending:			,						
Line	Summary by Development Account		mated Cost	Total	Actual Cost					
No.										
		Original	Revised	Obligated	Expended					
1	Total non-CFP Funds									
2	1406 Operations	1,066.00								
3	1408 Management Improvements Soft Costs									
	Management Improvements Hard Costs									
4	1410 Administration	10,034.00								
5	1411 Audit									
6	1415 Liquidated Damages									
7	1430 Fees and Costs									
8	1440 Site Acquisition									
9	1450 Site Improvement									
10	1460 Dwelling Structures	39,944.00								
11	1465.1 Dwelling Equipment—Nonexpendable	26,500.00								
12	1470 Nondwelling Structures	8,000.00								
13	1475 Nondwelling Equipment	14,800.00		0.00	0.00					
14	1485 Demolition									
15	1490 Replacement Reserve									
16	1492 Moving to Work Demonstration									
17	1495.1 Relocation Costs									

Ann	Annual Statement/Performance and Evaluation Report										
Capi	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary										
PHA N	ame: Bellevue Housing Authority	Grant Type and Number Capital Fund Program Grant Replacement Housing Factor	Capital Fund Program Grant No: NE26P17450100 6/2000								
	ginal Annual Statement Reserve for Disasters/ Emer)							
	ormance and Evaluation Report for Period Ending:12/			T							
Line No.	Summary by Development Account	Total Esti	mated Cost	Total Ac	tual Cost						
18	1499 Development Activities										
19	1502 Contingency										
	Amount of Annual Grant: (sum of lines)	100,344.00									
	Amount of line XX Related to LBP Activities										
	Amount of line XX Related to Section 504 compliance										
	Amount of line XX Related to Security –Soft Costs										
	Amount of Line XX related to Security Hard Costs										
	Amount of line XX Related to Energy Conservation										
	Measures										
	Collateralization Expenses or Debt Service										

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: Bellevu	ue Housing Authority	Grant Type and Nu Capital Fund Progra Replacement Housin	m Grant No: NE2	Federal FY of Grant: 6/2000		
Development Number Name/HA-Wide Activities	General Description of Major Work Categories	Dev. Acct No.	Quantity	Total Estimated Cost	Total Actual Cost	Status of Work
001	Flooring	1460		3,000.00		
002	Refrigerator, stoves, water heater, AC	1465		16,400.00		
002	Tub replacements, roofs, doors	1460		20,900.00		
003	Refrigerator, stoves	1465		2,400.00		
003	Waterproof basements, doors, floors	1460		6,850.00		
005-006	Stoves, Refrigerators	1465		7,700.00		
005	Doors, flooring	1460		9,194.00		
HA WIDE	Video camera, inspection computer	1475		14,800.00		
	Maintenance Equipment	1406		1,066.00		
	Coordination & Administration	1410		10,034.00		

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule

PHA Name: Bellevue Hou	using Authority	Capita	Type and Nur al Fund Progra cement Housin	m No: NE26P17450	0100	Federal FY of Grant: 06/2000	
Development Number Name/HA-Wide Activities	me/HA-Wide (Quarter Ending Date) (Quarter Ending Date)		Name/HA-Wide (Quarter E				Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
001	06/30/02			12/30/02			
002	06/30/02			12/30/02			
003	06/30/02			12/30/02			
005-006	06/30/02			12/30/02			
HA WIDE	06/30/02			12/30/02			

CAPITAL FUND PROGRAM TABLES START HERE

Annual Statement/Performance and Evaluation Report											
Cap	Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary										
	ame: Bellevue Housing Authority	Grant Type and Number			Federal FY of Grant:						
		Replacement Housing Fa			1999						
Ori	ginal Annual Statement Reserve for Disasters/ En)	<u>'</u>						
	ormance and Evaluation Report for Period Ending:			,							
Line	Summary by Development Account	Total I	Estimated Cost	Total	Actual Cost						
No.											
		Original	Revised	Obligated	Expended						
1	Total non-CFP Funds										
2	1406 Operations										
3	1408 Management Improvements Soft Costs										
	Management Improvements Hard Costs										
4	1410 Administration	5,098.87	5,098.87	100.00	100.00						
5	1411 Audit										
6	1415 Liquidated Damages										
7	1430 Fees and Costs	1,500.00	1,500.00	1,500.00	1,500.00						
8	1440 Site Acquisition										
9	1450 Site Improvement	33,468.13	33,468.13	33,468.13	33,468.13						
10	1460 Dwelling Structures	50,752.79	52,337.79	31,948.45	26,371.45						
11	1465.1 Dwelling Equipment—Nonexpendable	12,715.00	12,715.00	9,863.91	9,863.91						
12	1470 Nondwelling Structures	10,000.00	8,415.00	8,415.00	8,415.00						
13	1475 Nondwelling Equipment	1,676.21	1,676.21	1,676.21	1,676.21						
14	1485 Demolition										
15	1490 Replacement Reserve										
16	1492 Moving to Work Demonstration										
17	1495.1 Relocation Costs										

Ann	Annual Statement/Performance and Evaluation Report									
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part 1: Summary										
PHA N	ame: Bellevue Housing Authority	Grant Type and Number Capital Fund Program Grant Replacement Housing Factor			Federal FY of Grant: 1999					
	ginal Annual Statement Reserve for Disasters/ Emer				·					
	ormance and Evaluation Report for Period Ending:12/		•							
Line No.	Summary by Development Account	Total Esti	mated Cost	Total	Actual Cost					
18	1499 Development Activities									
19	1502 Contingency									
	Amount of Annual Grant: (sum of lines)	100,344.00	100,344.00	86,971.70	81,394.70					
	Amount of line XX Related to LBP Activities									
	Amount of line XX Related to Section 504 compliance									
	Amount of line XX Related to Security –Soft Costs									
	Amount of Line XX related to Security Hard Costs									
	Amount of line XX Related to Energy Conservation									
	Measures									
	Collateralization Expenses or Debt Service									

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part II: Supporting Pages

PHA Name: Bellevue Housing Authority **Grant Type and Number** Federal FY of Grant: Capital Fund Program Grant No: NE26P1745908-99 1999 Replacement Housing Factor Grant No: General Description of Major Work Development **Total Estimated Cost** Total Actual Cost Dev. Quantity Status of Number Categories Acct Work Name/HA-Wide No. Activities 001 Stoves, refrigerators, AC 1465 11,915.00 9,088.10 New windows, siding, insulation 001-002-003 9,224.00 9,224.00 1460 16,734.00 Bath, replace floor, 002 1460 2,554.19 002 1460 5,577.00 5,577.00 Sewage system HA WIDE Trees, sidewalks 1450 29,067.50 29,067.50 29,067.50 Kitchen sinks, faucets 2,865.00 001 1460 32.43 HA WIDE Vinyl flooring 1460 9,089.25 1,500.00 Carpet throughout office HA WIDE 1460 4,910.75 4,910.75 4,910.75 Typewriter, filing cabinet, snowblower HA WIDE 1475 1,676.21 1,676.21 1,676.21 003 **Environmental Review** 1430 1,500.00 1,500.00 1,500.00 HA WIDE Administration 1410 5.098.87 100.00 100.00 4,400.63 003 1450 4,400.63 4,400.63 Remove Garage 002 **Build Garage** 1470 10,000.00 8,415.00 8,415.00 8,415.00 Tub surrounds, New roof, replace ceiling 001-002-003 1460 22,109.60 18.996.85 12,236.70 12,236.70

Annual Statement/Performance and Evaluation Report Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP/CFPRHF) Part III: Implementation Schedule

PHA Name: Bellevue Hou	using Authority	Capita	Grant Type and Number Capital Fund Program No: NE26P174908-99 Replacement Housing Factor No:				Federal FY of Grant: 1999
Development Number Name/HA-Wide Activities	(Quart	und Obligate er Ending Da		All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
001	06/30/01			12/30/01			
002	06/30/01			12/30/01			
003	06/30/01			12/30/01			
005-006	06/30/01			12/30/01			
HA WIDE	06/30/01			12/30/01			